2150 6278	40687 6		State of Ne		s Mo	tor	Vel	nicl	e A	ccid	er	nt Re	eport	,	Shee	et1	of _	2
2	Total Nu		Local No./ Agency								HIT & RUI	INVESTIGA	INVESTIGATION MADE AT SCENE?					
A/1	of Vehi		No. B3-092700								YES	_	XYES NO STATE USE ONLY			1		
02	DATE OF ACCIDENT		5/2015 S M T W TH F S TIME OF ACCIDENT 1315								017412 001	L OIVE						
A/2	ACCIDENT	POLICE																
	PLACE COUNTY OF		Lancaster							1319	10/05	10/05/2015						
В	ACCIDENT	CITY	Lincoln								PRIVATE PROPER		LATITUDE			-		
65	ROAD ON WHICH ACCIDENT OCCURRED STREET/ HIGHWAY NO. 70TH AND HWY 2							ONE-WAY	YES NO									
с 1	DISTANCE	DISTANCE FROM FEET N S E W OF MILEPOORT				POST	HIGHWAY NO. 2				NO.	- A	LONGITUE	LONGITUDE			1	
D	MILEPC	MILEPOST IF AT INTERSECTION							IF NOT AT INTERSECTION									
1						○FE	ET C	MILES	N S	S E W OF NEAREST STREE				, BRIDGE, RAILROAD CROSSING				
V1/M	70TH AND HWY 2																	
10	MILES		N S E	W AND	WAS OUTS	SIDE CIT		TS, INI	w OF I	NEAREST	-	ROM NEA	REST TOWN					-
V2/M <b>01</b>				MILES					CIT	Y OR TOV	VN							
E	R. WORK ZONE		R2 R3 R4	S. PEDES	STRIAN SIFICATION	S1	S2	S3	S4 S5-	a S5-b	S6-a	a S6-b	DOES ACCID					
2	CODES												s 🗴	S 🗴 NO				
F	DDIVED.						VEI	HICLE	NO. 1				CTATE				FEMALE	-
1	DRIVER LICENSE	ا	NO. H13655	5465						Inuone			(Of License)	NE			MALE	
V1/N	KYLE N	DRIVER KYLE M BUBB PHONE 4022194776																
1 V2/N		DRIVER ADDRESS  5200 S 68TH ST, LINCOLN, NE 68516							01/18	01/18/1998								
2	DWNER PHONE LOCAL NO.									18 V1/2								
G	OWNER ADDR										V 1/2							
6	5200 S 68TH ST, LINCOLN, NE 68516									PENDING NO LB488465  YEAR 2046 STATE .				V1/3				
н 5	LICENSE PLATE	TE	NO. SEF118	T							(Pl	late Expires)	2016		(Of P	late)	NE	1/4/4
V1/O	VEHICLE		YEAR 2001	Chevrole	I	MODEL SK1			Picku	n truc	k	red		STIMATED I	DAMAG ED <b>\$</b>	1300	)	V1/4
2	VEHICLE ID NO. (VIN)									V1/5								
V2/O <b>2</b>	TOWED TO				TOWED BY	′						POLICY NO. 010 868 895						18 V1/6
							VEI	HICLE	NO. 2			010	000 093					55
1	DRIVER LICENSE		NO. G02168	084									STATE (Of License)	NE	SI	x X	FEMALE	
V1/P	DRIVER	DRIVER						PHONE 4024401074					LOCAL NO.					
1	DRIVER ADDRI	DRIVER ADDRESS CITY, STATE, ZIP DATE OF									V2/1 <b>18</b>							
V2/P	6150 CHENEY RIDGE CIR, LINCOLN, NE 68516						PHONE	BIRTH (MM / DD / YYY				(Y) 02/26/1957 LOCAL NO.						
J	ENER	ENERGY PRO 2020 4024401074																
01	OWNER ADDRESS 4931 N 57TH, LINCOLN, NE 68507								CITATION  PEND	CITATION NO.			V2/3					
V1/Q	LICENSE PLATE	PA	NO. TSM361								(Pl	YEAR late Expires)	2016		STA (Of P	TE late)	NE	V2/4
4 V2/Q	VEHICLE	YEAR		MAKE		MODEL ES3			BODY STY		<u> </u>	COLOR		STIMATED I	DAMAG	1500		
3	VEHICLE ID	ITO		Lexus		ESS			4 000	i Seu	an	<b>I</b>	CE COMPANY	TOTALE	υ ψ	1000		V2/5 18
К	NO. (VIN) TOWED TO	JIC	8BF28G115109171   TOWED BY							POLICY NO	-					V2/6		
02	Complete this section for all injured persons							BAS	16554738	36				55				
	1		olete this se plete a continuati										OF BIRTH	Seat Position	<b>2</b> Eject	Body Region	Injury Sev. Trai	SEX
VEH. #	NAME			AD	DRESS													
	LOCAL NO. MEDICAL FACILITY NAME					EMS SERVICE NAME					EMS RU	EMS RUN REPORT NO.						
VEH. #	NAME ADDRESS																	
V ⊆ П. #																		
	LOCAL NO.		MEDICAL FACILITY	NAME				EMS SE	RVICE NAM	E				EMS RU	N REP	ORT NO.		
VEH. #	NAME		1	AD	DRESS			<u> </u>									$\top$	
	LOCAL NO.		MEDICAL FACILITY	NAME				EMS SE	RVICE NAM	E				EMS RU	N REP	DRT NO.		
			T.					I						1				

THE FOLLOWING INFORMATION IS REQUIRED FOR ALL ACCIDENTS									
THE TOLESWIN	INDICATE BY DIAGRAM WHAT HAP	PENED AGEN	AGENCY CASE NO. B5-092706						
(			-092700						
Indicate North									
by Arrow	/								
	APOI 18'S OF N OF 65'		•						
	HWY 2 16' W OF E OF 70TH		٠						
		E Z							
		72'							
	S. 70th								
	Street								
	Hwy 2								
	65'								
DESCRIP	TION OF ACCIDENT BASED ON OFFICER'S IF	NVESTIGATION							
saw veh. 1 begin to turn then stop. But then it began				APPROX. COST OF DAMAGE.					
OBJECT DAMAGED OWNER NAME	ADDRESS	PHONE		\$ APPROX. COST OF DAMAGE					
OBJECT DAMAGED  OWNER NAME  OWNER NAME	ADDRESS								
S NAME	ADDRESS		PHONE						
NAME NAME	ADDRESS		PHONE	Ē					
VEHICLE MOVEMENT POINT OF IMI BEFORE COLLISION MOST DAMAGE		RESTRAINT USE VEHICLE 1	TOTAL OCCUPANT	-S   VEH   1   VEH   1					
VEH NO. N S E W ROAD OR (Enter numbers fo	or each vehicle)		ALCOHOL TESTING	Driver Driver Pedes- No. 1 No. 2 trian					
1 X HWY 2 VEHICLE 1	VEHICLE 2	2	ALCOHOL	Y Y Y					
2 X HWY 2 POINT OF IMPACT 03	POINT OF IMPACT 01 1 Deployed - front 2 Deployed - ide	1 None used - vehicle occupar 2 Lap & shoulder belt used	LEVEL TESTED	N X N X N					
1 100   100	MOST DAMAGED AREA  2 Deployed - side 3 Deployed - both front/side 4 Not deployed	3 Shoulder belt only used 4 Lap belt only used 5 Child safety seat used	BAC LEVEL	Driver Driver					
2 01 08 Entering	5 Not applicable/ No airbag available	6 Child booster seat used 7 DOT approved helmet used	ALCOH DRUG SUSPEC	OL/ No. 1 No. 2 iS 1 1					
01 Essentially 09 Leaving straight ahead traffic lane 09 Top & windows	7 VEHICLE 2	8 Costume helmet used 9 Restraint use unknown		cohol nor drugs suspected					
02 Backing 10 Parked 10 Undercarriage 01 03 Changing lanes 11 Slowing or 11 Total (all areas)	05 VEHICLE 2	VEHICLE 2	2 Yes - alcohol suspected 3 Yes - drugs suspected						
04 Overtaking/ stopped in traffic 12 Other 08 Passing 12 Other	07 06 -		·	cohol & drugs suspected					
05 Turning right 13 Unknown OFFICER NO. TROOP/	DEPARTMENT	2							
1442 TEAM/ BEAT SE INVESTIGATOR NAME (Print or Type)	Lincoln Police Departmen	t	Photographs YES taken? X NO						
Reed Pavelka	Approved by Officer Reed Pavell	DATE OF 10/05/2015							